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DATE: October 12, 2004 TO: COMMISSIONER FOR PATENTS, U.S. PATENT & TRADEMARK OFFICE FAX NO: (703) 872-9306 NO. OF PAGES: Cover + 13	
CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office on the date indicated below. <u>Renee M. Franks</u> Typed/Printed Name  Signature <u>October 12, 2004</u> Date	APPLICATION NO. 10/026,152
	FILING DATE 12/21/2001
	FIRST NAMED INVENTOR Brian Scott THORNTON
	ART UNIT 2652
	CONFIRMATION NO. 8234
	EXAMINER David Donald Davis
ATTORNEY DOCKET NO. K35R1732	
TITLE	FLEXURE DESIGN AND ASSEMBLY PROCESS FOR ATTACHMENT OF SLIDER USING SOLDER AND LASER REFLOW

ATTACHED WITH THIS SUBMISSION:

1. Transmittal Form (1 page)
2. Fee Transmittal for FY 2005 (1 page)
3. Petition for Extension of Time Under 37 CFR 1.136(a) (1 page)
4. Request for Withdrawal as Attorney or Agent and Change of Correspondence Address (1 page)
5. Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address (1 page)
6. Statement Under 37 CFR 3.73(b) (1 page)
7. Response to Non-Final Office Action dated 6/4/2004 (7 pages)

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PTO/SB/17 (10-04v2)

Approved for use through 07/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL
for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** 430.00**Complete if Known**

Application Number	10/026,152
Filing Date	12/21/2001
First Named Inventor	Brian Scott THORNTON
Examiner Name	David Donald Davis
Art Unit	2652
Attorney Docket No.	K35R1732

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:Deposit
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Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 790	2001 395	Utility filing fee	
1002 350	2002 175	Design filing fee	
1003 550	2003 275	Plant filing fee	
1004 790	2004 395	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			(\$) -0-

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20** =	18	
Multiple Dependent	-3** =	88	

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1202 18	2202 9	Claims in excess of 20	
1201 88	2201 44	Independent claims in excess of 3	
1203 300	2203 150	Multiple dependent claim, if not paid	
1204 88	2204 44	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)			(\$) -0-

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for <i>ex parte</i> reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 430	2252 215	Extension for reply within second month	430.00
1253 980	2253 490	Extension for reply within third month	
1254 1,530	2254 765	Extension for reply within fourth month	
1255 2,080	2255 1,040	Extension for reply within fifth month	
1401 340	2401 170	Notice of Appeal	
1402 340	2402 170	Filing a brief in support of an appeal	
1403 300	2403 150	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,370	2453 685	Petition to revive - unintentional	
1501 1,370	2501 685	Utility issue fee (or reissue)	
1502 490	2502 245	Design issue fee	
1503 680	2503 330	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 790	2809 395	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 790	2810 395	For each additional invention to be examined (37 CFR 1.129(b))	
1801 790	2801 395	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

430.00

SUBMITTED BY

Name (Print/Type) Joshua C. Harrison Esq.

Registration No. 45,686

(Complete if applicable)

Telephone (949) 672-6119

Signature

Date October 12, 2004

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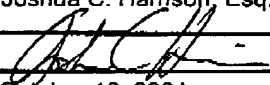
PTO/SB/21 (02-04)


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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/026,152
	Filing Date	12/21/2001
	First Named Inventor	Brian Scott THORNTON
	Art Unit	2652
	Examiner Name	David Donald Davis
Total Number of Pages in This Submission	Attorney Docket Number	K35R1732

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	1. Request for Withdrawal as Attorney or Agent and Change of Correspondence Address (1 page)	
	2. Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address (1 page)	
	3. Statement Under 37 CFR 3.73(b) (1 page)	
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Joshua C. Harrison, Esq., Reg. No. 45,686	
Signature		
Date	October 12, 2004	

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Typed or printed name	Renee M. Franks		
Signature		Date	October 12, 2004

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